Instruction 1(b).

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.	C. 20549
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Check this box if no longer subject to	STATEMENT OF CHANGES IN BENEFICIAL												
Section 16. Form 4 or Form 5													
obligations may continue. See													

	OMB APP	ROVAL							
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1	hours per response:	0.5							

OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* POLLEY DALE W						2. Issuer Name and Ticker or Trading Symbol HEALTHSTREAM INC [HSTM]									(Che	elationship eck all appl Direct	cable)	g Pers	son(s) to Iss 10% Ov	
(Last) 209 10TI SUITE 4	H AVENUI	•	(Middle)											Office below	r (give title)		Other (s below)	specify		
(Street)		N	37203										Line	6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(S		(Zip)																	
Table I - Non-Deriv 1. Title of Security (Instr. 3) 2. Trans Date (Month/)			saction	action 2A. Dee Executi Day/Year) if any			Deemed ecution Date,		3. 4. Securit Transaction Disposed Code (Instr. 5)		ties Acq	uired	(A) or	5. Amor	int of es ially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
										Code	,	Amount	(A) or (D) Prid		Price	Transaction(s) (Instr. 3 and 4)				(3 4)
Common Stock																5	5,000		D	
		-	Гable II -									sed of, onvertil				Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemee Execution I if any (Month/Day	Date,	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisal Expiration Date (Month/Day/Year		ate		7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securitie: Beneficia Owned Following Reported Transacti (Instr. 4)	e S Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exe	e rcisable		xpiration ate	Title	N O	Amount or Number of Shares					
Employee Stock Option (right to buy)	\$2.99	05/29/2008	05/29/20	008	A		6,000		05/2	29/2008 ⁽¹⁾	0	5/29/2018	Commo Stock		6,000	\$0.00	6,000)	D	

Explanation of Responses:

1. This Form 4/A is being filed to amend the vesting date of the May 29, 2008 stock option award.

Remarks:

Dale Polley

06/03/2008

** Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- * If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.